



# State of Illinois Distributor Affidavit for 2016 Sales of Cigarettes or OTP

MAIL BY  
JANUARY 20, 2017

See Page 5 Instructions before completing.

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## Part 1: Distributor Identification

Company Name		FEIN
Mailing Address		
City	State	Zip Code
Phone	Fax	Web Address
Illinois Business Tax Number		Cigarette License No. TP License No.
Name and title of person completing this form		

## Part 2: Questions relating to your business

Our sales of tobacco products represent (Check all that apply)

- |   |   |  |
|---|---|--|
| <input type="checkbox"/> Cigarettes stamped by us                                     | <input type="checkbox"/> RYO/MYO for which WE PAY the Illinois OTP tax              | <input type="checkbox"/> Pipe Tobacco    |
| <input type="checkbox"/> Unstamped Cigarettes   | <input type="checkbox"/> RYO/MYO for which ANOTHER ENTITY PAYS the Illinois OTP tax | <input type="checkbox"/> Snuff           |
| <input type="checkbox"/> Cigarettes which have already been STAMPED BY ANOTHER entity | <input type="checkbox"/> Other: _____   | <input type="checkbox"/> Cigars          |
|   |   | <input type="checkbox"/> "Little Cigars" |

Our sales of tobacco products are to the following (Check all that apply)

- |  |  |   |
|--|--|---|
| <input type="checkbox"/> Sales to other distributors | <input type="checkbox"/> Retail sales to customers | <input type="checkbox"/> Mail order sales |
| <input type="checkbox"/> Sales to retailers          | <input type="checkbox"/> Internet sales            | <input type="checkbox"/> Other _____      |

## Part 3: Purchases of Illinois Cigarette Stamps

The undersigned certifies, under penalty of perjury, as of the date of this certification, that the following list of Illinois cigarette stamp purchases and returns for the above license number is complete and accurate.

Month	Stamps (20 per pack)	Stamps (25 per pack)	Returns (20 per pack)	Returns (25 per pack)	Month	Stamps (20 per pack)	Stamps (25 per pack)	Returns (20 per pack)	Returns (25 per pack)
JAN					JUL				
FEB					AUG				
MAR					SEP				
APR					OCT				
MAY					NOV				
JUNE					DEC				

Illinois Stamp Inventory on hand January 1, 2016: 20 \_\_\_\_\_ 25 \_\_\_\_\_

Illinois Stamp Inventory on hand January 1, 2017: 20 \_\_\_\_\_ 25 \_\_\_\_\_

If no stamps were purchased in 2016 and no sales were made in 2016, please explain why you have a cigarette distributor license. \_\_\_\_\_

Include in this inventory your unused stamps purchased under this license, plus any unsold, stamped product you stamped under this license.

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- List only cigarettes which you stamped and RYO/MYO for which you paid the Illinois OTP tax.
- List Brand Families only, NOT brand styles (menthol, regular, full flavor, etc.).
- **INCLUDE BOTH PARTICIPATING AND NON-PARTICIPATING BRANDS.**

[illegible]



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## Part 5: Little Cigars

*You must check Yes or No.*

Does your business sell Little Cigars that are classified as cigarettes in Illinois? ☐ Yes ☐ No

Illinois 2016 Sales of packs of 20-25 cigars ☐ Yes ☐ No

Illinois 2016 Sales of packs other than 20-25 ☐ Yes ☐ No

**If you answered yes to any of the above, complete the Little Cigar/Cigarette Addendum.**

Does your business sell Little Cigars that are not classified as cigarettes in Illinois? ☐ Yes ☐ No

If yes, list the brand, manufacturer and sales volume (in sticks). Provide proof that such cigars weigh 4 or more pounds per thousand.

Brand	Manufacturer	Sticks	Brand	Manufacturer	Sticks

## Part 6: Internet/Mail Order Sales

*You must check Yes, No or Not Applicable*

Are Illinois cigarette stamps affixed to cigarettes sold via internet or mail order?

<u>Internet Sales</u>	<u>Mail Order Sales</u>
<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> No	<input type="checkbox"/> No
<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Not Applicable

Are Internet/Mail Order sales made with permission of the manufacturer?

<u>Internet Sales</u>	<u>Mail Order Sales</u>
<input type="checkbox"/> Yes	<input type="checkbox"/> Yes
<input type="checkbox"/> No	<input type="checkbox"/> No
<input type="checkbox"/> Not Applicable	<input type="checkbox"/> Not Applicable

If yes, list the manufacturers:

**For Internet Sales**, please provide the website address(es) that are used for the sales:

**For Mail Order sales**, please identify the publications or other venues where the products are advertised:

## Part 7: Vending Machine Sales

*You must check Yes or No.*

Does your business sell cigarettes to retailers that sell cigarettes via vending machines? ☐ Yes ☐ No

If Yes, on a separate sheet, provide the name, address and phone number for each customer.

## Part 8: Cigarette Machine Sales

*You must check Yes or No.*

Does your business have a Cigarette Machine that your employees and/or customers use to make stick cigarettes onsite from RYO/MYO, pipe or other tobacco? ☐ Yes ☐ No

Do you have a Cigarette Machine operator license? ☐ Yes ☐ No



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## Part 9: Multi-State Stampers

*You must check Yes or No.*

Are you licensed in states other than Illinois to stamp cigarettes? ☐ Yes ☐ No

If yes, please list ALL states in which you were licensed in 2016 to stamp cigarettes:

Are you licensed in states other than Illinois to pay the OTP tax? ☐ Yes ☐ No

If yes, please list ALL states in which you were licensed in 2016 to pay the OTP tax:

## Part 10: Industry Shipment Reporting

*You must check Yes or No.*

Do you report sales to Management Science Associates, Inc. (MSAI)? ☐ Yes ☐ No

If yes, please mark all years for which sales were reported to MSAI.

<input type="checkbox"/> 1999	<input type="checkbox"/> 2000	<input type="checkbox"/> 2001	<input type="checkbox"/> 2002	<input type="checkbox"/> 2003
<input type="checkbox"/> 2004	<input type="checkbox"/> 2005	<input type="checkbox"/> 2006	<input type="checkbox"/> 2007	<input type="checkbox"/> 2008
<input type="checkbox"/> 2009	<input type="checkbox"/> 2010	<input type="checkbox"/> 2011	<input type="checkbox"/> 2012	<input type="checkbox"/> 2013
<input type="checkbox"/> 2014	<input type="checkbox"/> 2015	<input type="checkbox"/> 2016		

Do you report sales to any other entity? ☐ Yes ☐ No

If yes, list all manufacturers or other entities to whom you provide information regarding sales in Illinois:

List all manufacturers for which you have contracts, agreements or some other arrangement to report sales information, including any direct buyer/customer agreements.

## Part 11: Designated Contact

Name Title

Mailing Address

City State Zip Code

Phone Fax E-mail



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### Part 12: Distributor Certification

Under penalties of perjury, I state that, to the best of my knowledge, all of the information contained in this Affidavit and any attached documents are true and accurate. ***This document must be signed and dated by an authorized notary public.***

Distributor's Designee (Print Name)

Title

Signature of Distributor's Designee

Date

Subscribed and sworn  
to before me this date: \_\_\_\_\_

Signature of Notary Public

County

Commission Expires

Mail by January 20, 2016

Submit the completed Affidavit to:

**Illinois Attorney General  
Tobacco Enforcement Bureau  
500 South Second Street  
Springfield IL 62706**

**For Additional Forms and Information**  
Phone (217) 785-8541  
Fax (217) 524-4701  
[www.IllinoisAttorneyGeneral.gov](http://www.IllinoisAttorneyGeneral.gov) (Click on Tobacco)

#### Instructions:

- ▶ All cigarette licensees must complete this Affidavit, regardless of whether they sold tobacco products during 2016.
- ▶ Do not include product which was stamped by another licensee.
- ▶ Where one company holds a number of licenses, each license holder must complete a separate Affidavit. The license holder that stamps or pays the Illinois OTP tax must complete Parts 3-5.
- ▶ Respond to each item. If a question does not apply, please explain.
- ▶ For Part 4, include sales information for participating manufacturers and non-participating manufacturers.
- ▶ Distributors are responsible for their own calculations. If computer reports are provided in response to Parts 4 and 5, they must include the total for 2016 by brand family.
- ▶ Attach additional pages as needed and where explanations are required.
- ▶ Cigarette Making Machine as used in Part 8 refers to the machines that are made available for use in a commercial setting, including retail locations and locations where the machines are made available to members of a "social club" or "non-profit." It does NOT include cigarette rolling machines intended and designed for use by individual consumers who do not intend to offer the resulting product for resale. Hot Rod Filling Station is an example of Cigarette Making Machine.

#### "Little Cigars":

- ▶ Effective July 1, 2013 Illinois legislation classifies little cigars as cigarettes for tax purposes and requires "Little Cigars" that meet the definition of "any roll, made wholly or in part of tobacco, where each roll has an integrated cellulose acetate filter and weighs less than 4 pounds per thousand and the wrapper or cover of which is made in whole or in part of tobacco" to be stamped with an Illinois cigarette excise tax stamp for those in packs of 20 or 25 and for those in packs of other than 20 or 25 to have the tax paid at the same rate as cigarettes.
- ▶ "Little Cigars" as used in Part 2 and Part 5 refer to any roll, made wholly or in part of tobacco, where such roll has an integrated cellulose acetate filter and weighs less than 4 pounds per thousand and the wrapper or cover of which is made in whole or in part of tobacco.
- ▶ Little Cigars also include any brands that continue to be taxed under OTP tax on or after July 1, 2013.